



10-19-05

RCE/1762/21W
PTO/SB/21 (08-08)
OMB 0651-0031

Please type a plus sign (+) inside this box → ☒

Approved for use through 08/30/03. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | | |
|---|----|-------------------------------|--------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application Number | 10/729,551 |
| | | Filing Date | December 5, 2003 |
| | | First Named Inventor | Stephen D. Pacetti |
| | | Group Art Unit | 1762 |
| | | Examiner Name | Eric B. Fuller |
| Total Number of Pages in This Submission | 20 | Attorney Docket Number | 50623.355 |

| ENCLOSURES (check all that apply) | | |
|---|---|--|
| <input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Postage Paid Return Postcard | <input type="checkbox"/> Drawing(s) In/Formal ___ Sheets with Submission of Drawings Transmittal | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Response To Office Action (13 pages) | <input type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate) | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> Amendment Transmittal Letter | <input checked="" type="checkbox"/> Request for Continued Examination Transmittal (RCE) (1 page) (in duplicate) | <input type="checkbox"/> Statement of Common Ownership (1 page) |
| <input type="checkbox"/> Statement of Common Ownership | <input checked="" type="checkbox"/> Fee Transmittal (1 page) (in duplicate) | <input type="checkbox"/> Request for Status of Application |
| <input checked="" type="checkbox"/> Petition for Extension of Time (1 month) (1 page) (in duplicate) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 citing ___ References | <input type="checkbox"/> Terminal Disclaimer | |
| <input checked="" type="checkbox"/> Express Mail Label No. EV 721158839 US | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | Remarks | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|--|
| Firm or Individual name | Squire, Sanders & Dempsey L.L.P. Cameron K. Kerrigna, Reg. No. 44,826 |
| Signature | |
| Date | October 17, 2005 |

| CERTIFICATE OF MAILING | | | |
|---|------------------|------|------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail in a box addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: October 17, 2005 | | | |
| Typed or printed name | Rebecca M. Klits | | |
| Signature | | Date | October 17, 2005 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark

FEE TRANSMITTAL

TOTAL AMOUNT OF PAYMENT

Subtotal (1) + Subtotal (2) + Subtotal (3) =

(\$910.00)

Complete if Known

| | |
|------------------------|--------------------|
| Application Number | 10/729,551 |
| Filing Date | December 5, 2003 |
| First Named Inventor | Stephen D. Pacetti |
| Group Art Unit | 1762 |
| Examiner Name | Eric B. Fuller |
| Attorney Docket Number | 50623.355 |

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to:

- ☒ Charge the indicated fees to the below mentioned deposit account.
- ☒ Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account.[†]
- ☐ Applicant claims small entity status. See 37 CFR 1.27.

Deposit Account Number: 07-1850

Deposit Account Name: Squire, Sanders & Dempsey

A Duplicate Copy of this authorization is attached

2. ☐ Payment Enclosed:☐ Check ☐ Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | Fee Due |
|------------------------------|------------------------------|--|---------|
| 1051/\$130 | 2051/\$65 | Surcharge - late filing fee or oath | |
| 1052/\$50 | 2052/\$25 | Surcharge-late provisional filing fee or cover sheet | |
| 147/\$2,520 | 147/\$2,520 | For filing a request for reexamination | |
| 1251/\$120 | 2251/\$60 | Extension for response within first month [†] | 120 |
| 116/\$450 | 2252/\$225 | Extension for response within second month [†] | |
| 1253/\$1,020 | 2253/\$510 | Extension for response within third month [†] | |
| 1254/\$1,590 | 2254/\$795 | Extension for response within fourth month [†] | |
| 1255/\$2,160 | 2255/\$1,080 | Extension for response within fifth month [†] | |
| 1401/\$500 | 2401/\$250 | Notice of Appeal | |
| 1453/\$1,500 | 2453/\$750 | Petition to revive unintentionally abandoned Application | |
| 1501/\$1,400 | 2501/\$700 | Utility Issue Fee (Or Reissue) | |
| 1502/\$800 | 2502/\$400 | Design Issue Fee | |
| 122/\$130 | 122/\$130 | Petitions to the Commissioner | |
| 123/\$50 | 123/\$50 | Petitions related to provisional applications | |
| 1806/\$180 | 1806/\$180 | Submission of Information Disclosure Statement | |
| 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | |
| 1809/\$790 | 2809/\$395 | Filing a submission after final rejection (37 CFR 1.129(a)) | |
| 1801/\$790 | 2801/\$395 | Request for Continued Examination (RCE) | 790 |

Other fee (specify):

Other fee (specify):

SUBTOTAL (3) (\$ 910)

FEE CALCULATION (fees effective 10/1/01)

1. FILING FEE

| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | Fee Due |
|------------------------------|------------------------------|--------------------|---------|
| 1011/\$300 | 2011/\$150 | Utility Filing | |
| 1017/\$200 | 2017/\$100 | Design Filing | |
| 1014/\$300 | 2014/\$150 | Reissue | |
| 1005/\$200 | 2005/\$100 | Provisional Filing | |
| SUBTOTAL (1) | | | (\$ 0) |

2. CLAIMS

| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description |
|------------------------------|------------------------------|-----------------------------------|
| 1202/\$50 | 2202/\$25 | Claims in excess of 20 |
| 1201/\$200 | 2201/\$100 | Independent claims in excess of 3 |
| 1203/\$360 | 2203/\$180 | Multiple dependent claim |

| | | |
|----------|---------|---|
| 110/\$18 | 210/\$9 | Reissue claims in excess of 20 and over original Patent |
|----------|---------|---|

| (Col. 1) | | (Col. 2) | | (Col. 3) | | Fee | Fee Due |
|--|------------------------|---------------------------------|---|----------|---|-------|---------|
| For | No. of Existing Claims | Highest No. Previously Paid For | | Extra** | | | |
| TOTAL | 39 | minus* 20 or 39 | = | 0 | x | \$50 | = \$0 |
| INDEP | 4 | minus* 3 or 4 | = | 0 | x | \$200 | = \$0 |
| [] First presentation of multiple dependent claim | | | | | | | = 0 |

* Subtract the greater number of Col. 2

** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3

SUBTOTAL (2) (\$0)

SUBMITTED BY

Typed or Printed Name

Cameron K. Kerrigan

Complete (if applicable)

Reg. Number

44,826

Signature

Date

October 17, 2005